The first state of the form of the first state of t

Please type a plus sign (+) inside this box -> +	Please type	a plus sig	gn (+) ınside	this box	\rightarrow	+
--	-------------	------------	---------------	----------	---------------	---

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032
Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Attorney Docket Number 24120-08 **DECLARATION FOR UTILITY OR** Gregory Allen **First Named Inventor DESIGN** COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) Application Number Herewith Filing Date ☑ Declaration ☐ Declaration To be assigned Submitted Submitted after Initial Group Art Unit Filing (surcharge (37 CFR 1.16 (e)) with Initial Filing To be assigned **Examiner Name** required)

As a below named inventor, I hereby declare that:						
My residence, post office address, and citizenship are as stated below next to my name.						
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Electronic Information Delivery System and Process Including Supplying of Information About Locations Visited By Users of Portable Identification Cards						
the specification of which (Title of the Invention) Is attached hereto OR						
was filed on (MM/DD/YYYY) as United States Application Number or PCT International						
Application Number and was amended on (MM/DD/YYYY) (If applicable).						
I hereby state that I have revi	ewed and understand the	contents of the above ident	ified specificatio	n, including the claims, as		
amended by any amendment			d-6d :- 07 OF	TD 4 50		
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.						
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO		
			0000	0000		
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:						
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.						
Application Number(s) Filing Date (MM/DD/YYYY)						
60/251,610 12/0		06/2000	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.			

[Page 1 of 2]
Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



Please type a plus sign (+) inside this box		\Box
Please type a plus sign (+) inside this box	_	

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

United States of United States or information which	f America, PCT Inter th is mate	under 35 U.S.C. 120, listed below and, in transional application rial to patentability atternational filing date	nsofar as the su in the manner p as defined in 37	rovided by th CFR 1.56 w	or ead	naranranh	of 35 U.S.C	. 112, I a en the fil	cknowle	edge the duty to e of the prior a	o disclose pplication
			Pai (N	Parent Filing Date (MM/DD/YYYY)			Parent Patent Number (if applicable)				
Number											
Additional	J.S. or PC	T international appli	cation numbers	are listed on	a supp	olemental p	orionty data s	sheet PT	O/SB/02	B attached her	reto.
As a named inve	As a named inventor, I hereby appoint the following registered practitioner(s and Trademark Office connected therewith: Customer Number				s) to pr	osecute th	nis application	n and to t	ransact	all business in Place Custon Number Bar C	the Patent ner code
			OR Registered p	ractitioner(s)	name	registratio	n number list	ted below		Label here	
	Nama			istration umber			Nam	e		Registration Number	
	Name	ntague		36,612							
		Wolfson		24,750							
		. Dippert		26,723						Ì	
		Gable		22,479							
Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.											
Direct all correspondence to: Customer Number or Bar Code Label				ess below							
Name		Mark Montague									
Address		Cowan, Liebo			owit	witz & Latman, P.C.					
Address		1133 Avenue of the Americas									
City		New York					ZIP		10036-679		
Country		USA			(212) 790-9	200	Fax	(2	212) <u>575-0</u>	671
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.											
Name of Sole or First Inventor:				☐ A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname							
Gregory				Allen							
Inventor's Signature										Date	
Residence:	Residence: City New York State NY			Country US			Citizenship	US			
Post Office A	Address			c/	o Ke	ylink Ne	etworks				
Post Office	Address			256	5 Bro	adway,	Suite 41	5			
City	Now York NY			IP	p 10025 Country US						
Additiona	ıl invento	ors are being nam	ed on the	_suppleme	ntal A	dditional	Inventor(s)	sheet(s) PTO/	SB/02A attac	ched heret